## STATE OF WASHINGTON DEPARTMENT OF HEALTH

Communicable Disease Epidemiology 1610 N.E. 150<sup>th</sup> Street Shoreline, Washington 98155-7224 Tel: (206) 418-5500 FAX: (206)418-5515

May, 2006

Dear Colleagues:

Since 1999, over 19,000 human West Nile virus (WNV) infections have been reported to local and state health departments in the United States. In the Northwest, Oregon and Idaho have reported 29 locally acquired WNV infections in humans since 2004, while the only infections identified among Washington and British Columbia residents were those acquired while traveling to areas where the virus is now endemic. We know that WNV has been successfully introduced in Washington as the virus was detected in a horse, a bird and two mosquito pools in central Washington (Yakima County) in September of 2005.

West Nile virus is usually transmitted to humans by the bite of an infected mosquito, but the virus has also been transmitted by transfusion, organ transplantation and perinatally. Blood banks nationwide are screening donated blood units for WNV, and no cases of transfusion associated transmission were reported in 2005.

Most people infected with WNV do not have symptoms, and about 20% develop West Nile fever -- fever, headache, fatigue, nausea, and occasionally, rash and lymphadenopathy. Less than 1% of infected people develop severe neuroinvasive disease (e.g., meningitis, encephalitis, acute flaccid paralysis), which is most common among patients 50 years of age and older. About 9% of neuroinvasive disease is fatal.

Preventing mosquito bites is the primary way to protect against WNV infection. Currently there is no availablehuman vaccine and no treatment other than supportive care has been shown to be effective. Clinical trials of preventive vaccine and therapeutic protocols are ongoing.

Arboviral Disease (infections caused by arthropod–borne viruses: e.g., WNV disease, dengue, Western and Eastern equine encephalitis) has been a notifiable condition in Washington since 2004.

We are asking for your continued assistance in monitoring arboviral diseases, including WNV disease, in Washington. Please report all suspected and laboratory confirmed WNV disease (WNV fever and neuroinvasive disease) to your local health department or district. Your local health department will work with the Washington State Department of Health Communicable Disease Epidemiology Section and Public Health Laboratories to facilitate laboratory confirmation of patients hospitalized with suspected WNV infection.

For more information, contact your local health department (contact information can be found at: <a href="http://www.doh.wa.gov/LHJMap/LHJMap.htm">http://www.doh.wa.gov/LHJMap/LHJMap.htm</a>) or the Department's Communicable Disease Epidemiology Section at 206.418.5500 or 877.539.4344. Attached is a list of references and websites that you may find useful.

Sincerely,

Mira Leslie, DVM, MPH State Public Health Veterinarian

Enc: 1

Jo Hofmann, MD State Epidemiologist for Communicable Disease